## Case 17-23000-JKS Doc 40 Filed 12/08/17 Entered 12/08/17 17:07:20 Desc Main Document Page 1 of 8

Fill in this information to identify your case:					
Debtor 1	Medhat M. Abde	elmaguid			
	First Name	Middle Name	Last Name		
Debtor 2	Amal A. Abdelr	maguid			
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I Case number	Bankruptcy Court for th  17-23000 (If known)	e: District of New Jers	sey		

Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information** 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ 345,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 18,120.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 363,120.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 278,660.59
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$24,377.87
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$146,039.78
Your total liabilities	\$449,078.24
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$4,735.72
5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$3,700.4 <sup>2</sup>

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Debtor 1

Medhat M. Abdelmaguid
First Name Middle Name

Case number (if known) 17-23000

Pa	Part 4: Answer These Questions for Administrative and S	tatistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes				
7.	<ul> <li>What kind of debt do you have?</li> <li>✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul>				
8.	<ol> <li>From the Statement of Your Current Monthly Income: Copy your to Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line</li> </ol>	otal current monthly income from Official \$\$ 3,572.86			
9.	9. Copy the following special categories of claims from Part 4, line	6 of Schedule E/F:  Total claim			
	From Part 4 on Schedule E/F, copy the following:				
	9a. Domestic support obligations (Copy line 6a.)	\$			
	9b. Taxes and certain other debts you owe the government. (Copy lin	e 6b.) \$ <u>24,377.87</u>			
	9c. Claims for death or personal injury while you were intoxicated. (Co	ppy line 6c.) \$			
	9d. Student loans. (Copy line 6f.)	\$			
	9e. Obligations arising out of a separation agreement or divorce that priority claims. (Copy line 6g.)	you did not report as \$			
	9f. Debts to pension or profit-sharing plans, and other similar debts. (	Copy line 6h.) + \$			
	9g. <b>Total</b> . Add lines 9a through 9f.	\$ <u>24,377.87</u>			

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		your case:		
Debtor 1	Medhat First Name	Middle Name	Abdelmaguid  Last Name	
Debtor 2	Amal	widdle name	Abdelrahman	
Spouse, if fili	ing) First Name	Middle Name	Last Name	
Jnited State	es Bankruptcy Court for the:	District of New Jerse	ey	
Case numb	per 17-23000		_ Che	eck if this is:
(If known)			XA	An amended filing
Official	Form 106I	_	ir O	A supplement showing postpetition chapter 15 ncome as of the following date:    Click or tap here to   MM / DD / YYYYY
Sche	edule I: Yo	ur Income		12/15
you are separate s	separated and your spo heet to this form. On the	use is not filing with you e top of any additional p		with you, include information about your spou ur spouse. If more space is needed, attach a er (if known). Answer every question.
. Fill in inform	your employment nation.		Debtor 1	Debtor 2 or non-filing spouse
-	have more than one job, a separate page with			[7] e
informa employ	ation about additional yers.	Employment status	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>
	e part-time, seasonal, or nployed work.			
3611-611		Cccupation		
Occupa	ation may include studen nemaker, if it applies.	L		
Occupa		Employer's name	Harvest Restaurants	Macy's Retail Holdings, Inc.Macy
Occupa			Harvest Restaurants  279 Springfield Avenue	Macy's Retail Holdings, Inc.Macy 7 West 7th Street
Occupa		Employer's name	-	
Occupa		Employer's name	279 Springfield Avenue Number Street	7 West 7th Street
Occupa		Employer's name	279 Springfield Avenue	
Occupa		Employer's name	279 Springfield Avenue Number Street  07922 City State ZIP Code	7 West 7th Street  Cincinnati OH 45202
Occupa		Employer's name Employer's address	279 Springfield Avenue Number Street  07922 City State ZIP Code	7 West 7th Street  Cincinnati OH 45202 City State ZIP Code
Occupi or hom		Employer's name Employer's address How long employed to	279 Springfield Avenue Number Street  07922 City State ZIP Code	7 West 7th Street  Cincinnati OH 45202 City State ZIP Code
Occupior hom	Give Details About	Employer's name  Employer's address  How long employed to the the date you file this for	279 Springfield Avenue Number Street  07922 City State ZIP Code here? years	7 West 7th Street  Cincinnati OH 45202 City State ZIP Code
Part 2: Estima spouse If you o	Give Details About te monthly income as o unless you are separated r your non-filing spouse h	Employer's name  Employer's address  How long employed the the date you file this ford.	279 Springfield Avenue  Number Street   07922  City State ZIP Code  here? years  prm. If you have nothing to report for any I	Cincinnati OH 45202 City State ZIP Code years  line, write \$0 in the space. Include your non-filing

Official Form 106l Schedule I: Your Income page 1

3,458.64

0.00

639.09

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Med Debtor 2 Am

Medhat Amal First Name

Middle Name

Abdelmagei@cument

Abdelrahman

Last Name

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Case number (if known) 17-23000

				For I	Debtor 1			ebtor 2 or ing spouse	
С	ору I	ine 4 here	4.	\$	3,458.64		\$	639.09	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	466.99		\$	59.02	
	5b.	Mandatory contributions for retirement plans	5b.	\$			\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$			\$		,
	5d.	Required repayments of retirement fund loans	5d.	\$			\$	0.00	
	5e.	Insurance	5e.	\$			\$	0.00	
	5f.	Domestic support obligations	5f.	\$			\$	0.00	
	5g.	Union dues	5g.	\$			\$		
	5h.	Other deductions. Specify:	5h.	+\$	36.00		+\$		
j.	Add	<b>the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	502.99		\$	0.00	
<b>'</b> .	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,955.65		\$	0.00	
١.	List	all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$			\$	0.00	
		Interest and dividends		\$			\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt						
		Include alimony, spousal support, child support, maintenance, divorce		•			•	0.00	
		settlement, and property settlement.	8c.	\$			\$	0.00	
	8d.	Unemployment compensation					\$		
	8e.	Social Security	8e.	\$			\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:							
		Specily.	8f.	\$			\$	0.00	
	8g.	Pension or retirement income	8g.	\$			\$	0.00	
	8h.	Other monthly income. Specify: Assistance from Son and Daughter	8h.	+\$	1,200.00		+\$	0.00	
	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	1,200.00	]	\$	0.00	
		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	4,155.65	+	\$	580.07	\$
1.	State	all other regular contributions to the expenses that you list in Sched	ule .	I.		1			
•		de contributions from an unmarried partner, members of your household, you			dents, your ro	omi	mates, a	nd other	
		ds or relatives.	ot o	roilobl	a ta nav ava	000	a liatad	in Cohodule	. ,
	Do n Spec	ot include any amounts already included in lines 2-10 or amounts that are n			е то рау ехр	ense	es listed		· J. - \$
	opec	ıry:					_		- ψ
		the amount in the last column of line 10 to the amount in line 11. The r							\$
	vvrite	that amount on the Summary of Your Assets and Liabilities and Certain St	aust	icai in	rormation, if i	т ар	piles	12. <b>Co</b> r	nbine
_	_								nthly i
3.		ou expect an increase or decrease within the year after you file this fo	rm?						
	۷ N	ro. Yes. Explain:							
	י ו	53. Lapiaii.							

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Fill in this information to identify your case:				
Debtor 1 Medhat First Name Middle Name  Debtor 2 Amal (Spouse, if filing) First Name Middle Name  United States Bankruptcy Court for the:  Case number 17-23000	Abdelmaguid  Last Name Abdelrahman  Last Name	Check if this is:  An amended fi  A supplement expenses as of Click or tap here MM / DD / YYYYY	showing postp	etition chapter 13 date:
Official Form 106J				
Schedule J: Your Expens	ses			12/15
Be as complete and accurate as possible. If two marries information. If more space is needed, attach another sh (if known). Answer every question.  Part 1: Describe Your Household	d people are filing togethe			-
1. Is this a joint case?				
<ul><li>No. Go to line 2.</li><li>✓ Yes. Does Debtor 2 live in a separate household?</li></ul>	·			
✓ No		Journal of Dahler 2		
Yes. Debtor 2 must file Official Form 106J-2  2. <b>Do you have dependents?</b> No	z, Experises for Separate F	nouseriola of Deplor 2.		
Do not list Debtor 1 and	information for Debtor 1	ent's relationship to I or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'		Son	8	□ No ✓ Yes
names.		Daughter	20	□ No ✓ Yes
		Son	22	□ No ✓ Yes
				No
				Yes
				☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				1
Part 2: Estimate Your Ongoing Monthly Expen	ses			
Estimate your expenses as of your bankruptcy filing da expenses as of a date after the bankruptcy is filed. If the applicable date.				
Include expenses paid for with non-cash government a such assistance and have included it on Schedule I: You			Your expens	ses
The rental or home ownership expenses for your reany rent for the ground or lot.	sidence. Include first mort	gage payments and 4.	\$	2,199.44
If not included in line 4:		7.		
4a. Real estate taxes		4a.	\$	
4b. Property, homeowner's, or renter's insurance		4b.	\$	
4c. Home maintenance, repair, and upkeep expenses		4c.	\$	
4d. Homeowner's association or condominium dues		4d.	\$	

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Debtor 1 Debtor 2

Medhat Amal First Name

Middle Name

Abdelrahman Last Name

Case number (if known) 17-23000

		_	Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		I
	6a. Electricity, heat, natural gas	6a.	\$ 227.00
	6b. Water, sewer, garbage collection	6b.	\$ 150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 249.00
	6d. Other. Specify:	6d.	\$
	Food and housekeeping supplies	7.	\$ 650.00
	Childcare and children's education costs	8.	\$
	Clothing, laundry, and dry cleaning	9.	\$ 50.00
0.	Personal care products and services	10.	\$100.00
1.	Medical and dental expenses	11.	\$
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.		\$ 75.00
	Do not include car payments.	12.	\$ <u>75.00</u>
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
4.	Charitable contributions and religious donations	14.	\$
5.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$ \$
_			· -
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	:
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Abdelmaguid
Abdelrahman
Last Name Page 7 of 8 Debtor 1 Debtor 2 Medhat Amal First Name Case number (if known) 17-23000 Middle Name

. Oth	er. Specify:	21.	+\$	
2. Ca	culate your monthly expenses.			
22a	Add lines 4 through 21.	22a.	\$	3,700.44
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
220	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	3,700.44
. Ca	culate your monthly net income.			
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,735.72
23b	Copy your monthly expenses from line 22c above.	23b.	<b>-</b> \$	3,700.44
230	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,035.28
For mor	rou expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your gage payment to increase or decrease because of a modification to the terms of your mortgage?			
✓ N				
	es. Explain here:			

Fill in this information to identify your case:

Debtor 1 Medhat Abdelmaguid
First Name Middle Name Last Name

Debtor 2 Amal Abdelrahman
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of New Jersey

Case number (If known)

17-23000

Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
	Did you pay or agree to pay someone who is l  No Yes. Name of person	
		Signature (Official Form 119).
	Under penalty of perjury, I declare that I have that they are true and correct.	read the summary and schedules filed with this declaration and
×	/s/Medhat Abdelmaguid Medhat Abdelmaguid Signature of Debtor 1	/s/Amal Abdelrahman Amal Abdelrahman Signature of Debtor 2
	Date 12/08/2017 MM / DD / YYYY	Date 12/08/2017